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FAX TRANSMISSION**DATE:** November 1, 2005**PTO IDENTIFIER:** Application Number 10/611,396-Conf. #6850
Patent Number**Inventor:** Wai C. Chan et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** DARBY & DARBY P.C.

John W. Branch

PHONE: (206) 262-8900**Attorney Dkt. #:** 08211/0200242-US0/NCP05556**PAGES (Including Cover Sheet):** 5**CONTENTS:** Certificate of Transmission (1 page)
Transmittal Form (1 page)
Revocation of Power of Attorney with New Power of Attorney and
Change of Correspondence Address (1 page)
Statement Under 37 CFR 3.73(b) (1 page)

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PTO/SB/97 (08-04)

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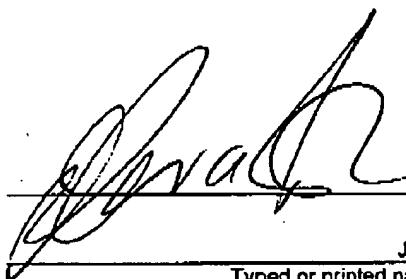
Application No. (if known): 10/611,396

Attorney Docket No.: 08211/0200242-US0/P05556

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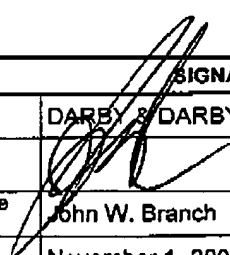
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| <p>TRANSMITTAL FORM</p> <p><i>(to be used for all correspondence after initial filing)</i></p> | | Application Number | 10/611,396-Conf. #6850 |
| | | Filing Date | June 30, 2003 |
| | | First Named Inventor | Wai C. Chan |
| | | Art Unit | 2816 |
| | | Examiner Name | T. D. Cunningham |
| Total Number of Pages in This Submission | 5 | Attorney Docket Number | 08211/0200242-US0/P05556 |

| ENCLOSURES (Check all that apply) | | |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet Certificate of Transmission Statement Under 3.73(b) |
| Remarks | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm Name | DARBY & DARBY P.C. | |
| Signature |  | |
| Printed name | John W. Branch | |
| Date | November 1, 2005 | Reg. No. 41,633 |

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| | | |
|--|------------------------|--------------------------|
| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/811,396 |
| | Filing Date | June 30, 2003 |
| | First Named Inventor | Wai C. Chan |
| | Art Unit | 2816 |
| | Examiner Name | T. D. Cunningham |
| | Attorney Docket Number | 08211/0200242-US0/P05556 |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.
OR
☒ I hereby appoint the practitioners associated with the Customer Number: **38845**

☒ Please change the correspondence address for the above-identified application to:
☒ The address associated with Customer Number: **38845**
OR

☐ Firm or Individual Name **DARBY & DARBY P.C.**
John W. Branch

Address **P.O. Box 5257**

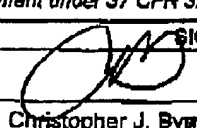
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Country **US** State **NY** Zip **10150-5257**

Telephone **(212) 527-7700** Email

I am the:
☐ Applicant/Inventor.
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature 

Name **Christopher J. Byrne**

Date **10/25/05** Telephone **(408) 721-8165**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of **1** forms are submitted.

(S:\08211\0200242-US0\80041254.DOC 10/25/05 11:03 AM)

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Wai C. Chan et al.

Application No./Patent No.: 10/611,396

Filed/Issue Date: June 30, 2003

Entitled: ADAPTIVE THRESHOLD SCALING

National Semiconductor Corporation, a

Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 01400 Frame 0881, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.
(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Christopher J. Byrne
Signature

Christopher J. Byrne
Printed or Typed Name

Director of IP and Technology Licensing
Title

10/25/05
Date

(408) 721-6155
Telephone Number

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